

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	90	32	2/20
FORMALITY REVIEW	PA	190	05-09-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Original	9/1/3/6/4/5/
1	4/19/20/3/7/
2	2/22/22/3/3/
3	✓✓✓
4	✓✓
5	✓✓
6	✓✓
7	✓✓
8	✓✓
9	✓✓
10	✓✓✓
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41	✓✓✓
42	✓✓✓
43	✓✓✓
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46	✓✓✓
47	✓✓✓
48	✓✓✓
49	✓✓✓
50	✓✓✓

Claim	Date
Final	9/1/3/6/4/5/
Original	4/19/20/3/7/
51	✓✓✓
52	✓✓✓
53	✓✓✓
54	✓✓✓
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100	✓✓✓

Claim	Date
Final	101
Original	102
103	
104	
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)